STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses

for LOBBYISTS

(RSA Chapter 15)

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PLEASE PRINT

1. Name of Lobbyist(s) Matthew S, House JUL 16 2018
II. Name of lobbyist's partnership, firm or corporation, if any: NEW HAMPSHIRE DEPARTMENT OF STATE
Dartmouth Hitchcock (Name of partnership, firm or corporation)
One medical Center Drive, Lebanon NH 03756 Business Address: (Street) (Town/City) (State) (Zip Code)
(M3 653-1910 (M3) 653-1906 e-mail matthew. S. horde @hitchcock.org
III. This statement covers: (Choose one - file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client).
All reportable transactions occurring in the months prior to the reporting date relative to the following elient: employer
Oartmouth-Hitchcock (Full Name of Client as it appears on the Lobbyist Registration Form)
OR
All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client.
IV. Date of Report April 25, 2018 Suly 25, 2018 July 25, 2018 activity from date of registration to 3/31/18 activity from 4/1/18 to 6/30/18
October 31, 2018
V. There have been no fees received and no reportable transactions made since the last report. If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 03301.
VI. Check if additional reports are attached:
1 you have received fees or made expenditures, you must file Addendum A- Fees and Expenses
☐ If you have paid an honorarium or reimbursed expenses, you must file Addendum B— Report of Honorariums or Expense Reimbursement
flyou, your firm, or your family has made political contributions, you must file Addendum C- Political Contributions
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.
(Signature of lobbyist) (Date)
Mathew S. Houde (Print Name of lobbyist)

STATE OF NEW HAMPSHIRE



Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

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<u>•1716</u>	JUL 1 6 2018
1. Name of Lobbyist(s) Matthew S. Houde	NEW HAMPSHIRE DEPARTMENT OF ST
11. Name of lobbyist's partnership, firm or corporation, if any: Dartmorth-Hitchcock (Name of partnership, firm or corporation)	
(Name of partnership, firm or corporation) employer Durtmouth-Hitchco	DCK_Date 7/11/18
IV. Fees Received Indicate the gross amount of all fees received from the client identified a to lobbying, including fees for services such as public advocacy, govern including research, monitoring legislation, and related legal work. The reduced by any expenses:	ment relations, or public relations services
a) Total of all fees received in this reporting period	a) \$ 7,500,00
b) Total of all fees received this calendar year, prior to this reporting per (This should equal the total of all prior monthly reports for this calendary	
c) Total of all fees received to date (Add lines a and b)	0)8_15,000,00
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to fees. Separate reports are to be filed for expenditures made relative to the lobbyist(s)/firm that are unrelated to any one client a separate represent to be reported in one of three categories of expenses: (aduring the reporting period for salaries, benefits, support staff, and offindividual expenses where the expenditure was of \$25.00 or less (for explanch where the cost was \$25.00 or less, purchase of a pen with a value being lobbied, purchase of a ceremonial object given to a person being I (c) an itemized statement of each individual expenditure made during this	each client and if expenditures are made by port may be filed for the lobbyist(s)/firm. a) the aggregate total of all expenses paid ice expenses; (b) the aggregate total of all eample: meals purchased during a business of less than \$10 that is given to the person obbied with a value of \$25.00 or less); and

any purpose not covered by (a) (for example: purchase of a meal with value of greater than \$25, purchase of a ceremonial object to be given to the subject of lobbying with a value greater than \$25, but not greater than \$50, restaurant expenses for a legislative reception). Expenses for honorariums, expense reimbursement, or political contributions will be reported on separate addendums and should not be reported on Addendum A.

a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$	
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$	
a) Total of all itemized expenditures reported in detail in section VI	c) \$	Ī

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	ns
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	s Na
	\$
	\$
	\$
	\$
	\$
	•••••••
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information
(Signature of lobbyist)	(Date)
Matthew S. Houde_	,
(Print Name of lobbyist)	

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JUL 1 6 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions

Addendum C (RSA Chapter 15:6)

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JUL 1 6 2018

. Name of Lobbyist(s)	Matthew S.	11/4 / 14-	
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I. Name of lobbyist's pa	11-1	poration, it any:	DEFAITMENT OF S
Uurtmain (Name of na	THATCH OCI	ζ	
II. Name of Client	artmouth-t	titchcock	Date7/11/18
Political Contributions For each political contributions			ter 664 paid on behalf of the
Full name of candidate:	(Last Name)	Molly (First Name)	(Middle Name/Initial)
Amount of contribution \$ _		Office Candidate is	s Seeking GOVERNOV
	and contribution, provide	a description of the good	ds or services provided, and enter the
actual cost of the in-kind co	ntribution on the line abo	ve for amount of contribu	ution. If the actual cost is not know
f the contribution is an in-kactual cost of the in-kind coenter an estimated value and	ntribution on the line abo	ve for amount of contribu	ution. If the actual cost is not know
actual cost of the in-kind co	ntribution on the line abo	ve for amount of contrib	ution. If the actual cost is not know
actual cost of the in-kind co	ntribution on the line abo	ve for amount of contrib	ution. If the actual cost is not know
ectual cost of the in-kind co enter an estimated value and	ntribution on the line abo	ve for amount of contribu	ution. If the actual cost is not know
actual cost of the in-kind co	ntribution on the line abo	ve for amount of contribu	ution. If the actual cost is not know
ectual cost of the in-kind co enter an estimated value and	ntribution on the line abo d the word "estimate." Kahn (Last Name)	Jay (First Name)	ution. If the actual cost is not know
Full name of candidate: Amount of contribution \$	Kahn (Last Name) JOO. 50 sind contribution, provide ontribution on the line abo	Jay (First Name) Office Candidate is a description of the good	(Middle Name/Initial)
Full name of candidate: Amount of contribution \$	Kahn (Last Name) JOO. 50 sind contribution, provide ontribution on the line abo	Jay (First Name) Office Candidate is a description of the good	(Middle Name/Initial) s Seeking Secate ds or services provided, and enter t
Full name of candidate: Amount of contribution \$	Kahn (Last Name) JOO. 50 sind contribution, provide ontribution on the line abo	Jay (First Name) Office Candidate is a description of the good	(Middle Name/Initial) s Seeking Secate ds or services provided, and enter t
Full name of candidate: Amount of contribution \$	Kahn (Last Name) JOO. 50 sind contribution, provide ontribution on the line abo	Jay (First Name) Office Candidate is a description of the good	(Middle Name/Initial) s Seeking Secate ds or services provided, and enter t
Full name of candidate: Amount of contribution \$	Kahn (Last Name) JOO. 50 sind contribution, provide ontribution on the line abo	Jay (First Name) Office Candidate is a description of the good	(Middle Name/Initial) s Seeking Secate ds or services provided, and enter t
Full name of candidate: Amount of contribution \$ If the contribution is an in-katual cost of the in-kind coenter an estimated value and	Kahn (Last Name) JOO. 50 sind contribution, provide ontribution on the line abo	Jay (First Name) Office Candidate is a description of the good	(Middle Name/Initial) s Seeking Secate ds or services provided, and enter t
Full name of candidate: Amount of contribution \$	Kahn (Last Name) JOO. 50 sind contribution, provide ontribution on the line abo	(First Name) Office Candidate is a description of the good ve for amount of contribution of the good vector amount of contribution	(Middle Name/Initial) s Seeking Secate ds or services provided, and enter t

(If more than three contributions were made, report additi	ional contributions on separate addendum C forms.)
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 a is true and complete to the best of my knowled	and hereby swear or affirm that the foregoing infige and belief.
and the	1/11/18
(Signature of lobbyist)	(Date)
Mallhand SIL	

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